

Los Angeles County Sheriff's Department

Supervisor's Report on Use of Force

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Incident Information

URN: 9 1 0 - 1 5 8 4 0 - 1 4 1 2 - 0 9 1		Date: 11/9/10	Time: 1900
Location:	Fetterly Avenue		City or Station: Los Angeles
Bureau/Station/Facility:	Special Enforcement Bureau K-9	Admin. Investigation: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
Type of Force:	Significant Force/ Dog Bite		
Deputy Injury: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Suspect Injury YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
<input type="checkbox"/> Call	<input checked="" type="checkbox"/> Observation	<input type="checkbox"/> Detail	<input type="checkbox"/> Foot Pursuit <input type="checkbox"/> Vehicle Pursuit
IAB Notified: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Person Notified: Lt. Vaughan	Emp: [REDACTED]	IAB Roll Out: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

Involved Employee

E 1	Employee #	Last Name	First Name	Middle Name
		Messerschmidt	Curt	A
	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Race: W	Unit of Assignment: Special Enforcement Bureau K-9	
	Work Assignment (Unit #, Module, etc.): K-9			
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input checked="" type="checkbox"/> PM	<input checked="" type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty	Age: [REDACTED]	Height: 5'11" Weight: 200
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____			Coroner Case # Directed Force <input checked="" type="checkbox"/> Significant Force <input type="checkbox"/>

E	Employee #	Last Name	First Name	Middle Name
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Unit of Assignment:	
	Work Assignment (Unit #, Module, etc.):			
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty	Age:	Height: Weight:
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____			Coroner Case # Directed Force <input type="checkbox"/> Significant Force <input type="checkbox"/>

E	Employee #	Last Name	First Name	Middle Name
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Unit of Assignment:	
	Work Assignment (Unit #, Module, etc.):			
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty	Age:	Height: Weight:
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____			Coroner Case # Directed Force <input type="checkbox"/> Significant Force <input type="checkbox"/>

Additional Involved Employees

On Duty Supervisor						
Emp. #	Last Name	First Name	Middle Name	Rank	Present YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Witness to Incident YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	Lee	Eric		Sgt		
Watch Sergeant						
Emp. #	Last Name	First Name	Middle Name			
Watch Commander						
Emp. #	Last Name	First Name	Middle Name			

Watch Commander (Print Name)	Watch Commander's Signature:	Emp #:	Date
Sgt. Albert Maldonado	[REDACTED]		
Supervisor Completing Form: (Print Name)	Emp #:	Copy Provided to Employee by:	Emp #:

Unit Commander (Print Name)	Unit Commander's Signature:	Emp #:	Date
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DISCOVERY Use Only

FO#

Supervisor's Report on Use of Force

SUSPECT INFORMATION

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S 1

Suspect Information							
Last Name		Romero		First Name		Salim	
Middle Name							
AKA Last Name				First Name		Middle Name	
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Race: H		Street Address:		City:	
State & Zip Code:							
Work Phone:		Home Phone:		Age: 30		Height: 509	
D.O.B. 10-20-78		Weight: 181		Armed? <input type="checkbox"/>			
Booking #: 2541302		Primary Charge Code: 10851(a) VC		Secondary Charge Code: 496(1) PC		Criminal History	
EMT in attendance? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Name: LACO		Unit: 3		Phone #:	
Hospital Admission? <input checked="" type="checkbox"/>		Rec'd Treatment At: LCMC		Coroner Case #:		Mental History <input type="checkbox"/>	
By Doctor: Chakko		Address:		Phone #:			
Under Influence: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Substance:		Mental Illness <input type="checkbox"/>			

S

Suspect Information							
Last Name				First Name		Middle Name	
AKA Last Name				First Name		Middle Name	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Race:		Street Address:		City:	
State & Zip Code:							
Work Phone:		Home Phone:		Age:		Height:	
D.O.B.:		Weight:		Armed? <input type="checkbox"/>			
Booking #:		Primary Charge Code:		Secondary Charge Code:		Criminal History <input type="checkbox"/>	
EMT in attendance? <input type="checkbox"/> YES <input type="checkbox"/> NO		Name:		Unit:		Phone #:	
Hospital Admission? <input type="checkbox"/>		Rec'd Treatment At:		Coroner Case #:		Mental History <input type="checkbox"/>	
By Doctor:		Address:		Phone #:			
Under Influence: <input type="checkbox"/> YES <input type="checkbox"/> NO		Substance:		Mental Illness: <input type="checkbox"/>			

S

Suspect Information							
Last Name				First Name		Middle Name	
AKA Last Name				First Name		Middle Name	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Race:		Street Address:		City:	
State & Zip Code:							
Work Phone:		Home Phone:		Age:		Height:	
D.O.B.:		Weight:		Armed? <input type="checkbox"/>			
Booking #:		Primary Charge Code:		Secondary Charge Code:		Criminal History <input type="checkbox"/>	
EMT in attendance? <input type="checkbox"/> YES <input type="checkbox"/> NO		Name:		Unit:		Phone #:	
Hospital Admission? <input type="checkbox"/>		Rec'd Treatment At:		Coroner Case #:		Mental History <input type="checkbox"/>	
By Doctor:		Address:		Phone #:			
Under Influence: <input type="checkbox"/> YES <input type="checkbox"/> NO		Substance:		Mental Illness <input type="checkbox"/>			

Supervisor's Report on Use of Force
EMPLOYEE / NON-EMPLOYEE INFORMATION
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Employee Witnesses					
Emp. #	Last Name	First Name	Middle Name		
	Reedy	Spencer			
Emp. #	Last Name	First Name	Middle Name		
	Missel	Dennis			
Emp. #	Last Name	First Name	Middle Name		
	Lee	Eric			
Emp. #	Last Name	First Name	Middle Name		
Emp. #	Last Name	First Name	Middle Name		
Emp. #	Last Name	First Name	Middle Name		

Non-Employee Witnesses					
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.	
Street Address		City	Zip Code	Work Ph.	Home Ph.

☐ Additional Witness

9 0 - 1 5 8 4 0 - 1 4 1 2 - 0 9 1

Method

(AW) Arwen	(FH) Firearm (Handgun)	(PO) Personal Weapon (Other)
(BC) Baton: (Control)	(FR) Firearm (Rifle)	(RS) Resistance
(BI) Baton: (Impact)	(FS) Firearm (Shotgun)	(CN) Restraint Device (Capture Net)
(BF) Bodily Fluids	(FO) Firearm (Other)	(RH) Restraint Device (Handcuffs)
(CN) Canine	(FB) Flashbang	(HB) Restraint Device: Hobble (Legs Only)
(CR) Carotid Restraint	(FL) Flashlight	(TP) Restraint Device: Hobble (TARP)
(CH) Choke Hold	(OE) Other Weapon: Edged	(RE) Restraint Device: REACT Belt
(CT) Control Holds: (Control Techniques)	(OV) Other Weapon: Vehicle	(SP) Sap
(TT) Control Holds: (Team Takedown)	(OB) Other Weapon: Blunt Object	(SH) Shield
(TD) Control Holds: (Takedown)	(OO) Other Weapon: Other	(SG) 37mm Stinger
(CE) Chemical	(PK) Personal Weapon: Feet/Leg: (Kick)	(SB) Sting Ball
(OC) Chemical Agents (OC Spray)	(PS) Personal Weapon: Feet/Leg: (Sweep)	(ST) Stun Bag
(TG) Chemical Agents (Tear Gas)	(PH) Personal Weapon (Hand/Arm)	(TR) Taser
(EX) Explosives	(PP) Personal Weapon (Push)	(UC) Uncooperative

Type of Injury

(AB) Abrasion	(DB) Dog Bite	(PA) Paralysis
(BR) Bruise	(FR) Fractures	(PW) Puncture Wound
(BU) Burn	(GS) Gunshot	(SD) Soft Tissue Damage
(CP) Complaint of Pain	(HB) Human Bite	(ST) Sprain/Twists
(CO) Concussion	(LC) Lacerations	(UN) Unconscious
(DH) Death	(ND) Nerve Damage	(RM) Refused Med Treatment
(DI) Dislocation	(OD) Organ Damage	(NN) NONE

Body Part Injured

(AD) Abdomen	(FA) Face	(HI) Hip
(AK) Ankle	(FE) Feet	(IN) Internal
(AR) Arm	(FI) Fingers	(KN) Knees
(BK) Back	(GE) Genitals	(LE) Leg
(BT) Buttocks	(GR) Groin	(NK) Neck
(CH) Chest	(HD) Hands	(NO) Nose
(EL) Elbow	(HE) Head	(SH) Shoulder
		(WR) Wrist

[illegible]

Supervisor's Report on Use of Force

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Force Applied

Incident Details

Suspect Romero was the driver of a stolen vehicle. When stopped by deputies he fled to a back yard of a residence. Sheriffs Department K-9 deployed and located the suspect hiding in the backyard. The dog bit the suspect on the right forearm. The suspect sustained punctures and lacerations to his right forearm as a result of the dog bite.

Report Use of Force by Involved Employee(s)

Witness Interview(s)

INVESTIGATIVE SUMMARY

USE OF FORCE - CANINE BITE

SPECIAL ENFORCEMENT BUREAU - CANINE DETAIL / ELA STATION AREA

IAB File Number: FO2277820

URN: 910-15840-1413-091

OPENING STATEMENT:

On Tuesday, November 09, 2010, at approximately 1700 hours, Special Enforcement Bureau Canine Handler Deputy Curt Messerschmidt responded to the East Los Angeles Sheriff's Station area to assist in a search for a suspect wanted for driving a stolen vehicle. Upon Deputy Messerschmidt's arrival on scene, he was briefed, along with K-9 Sergeant Eric Lee, by East Los Angeles Deputies Monica Farias # [REDACTED] and [REDACTED] # [REDACTED]. Deputy Farias related to them they were following a confirmed stolen vehicle and conducting their pre-coordinated radio traffic when the vehicle came to a sudden stop. The driver (Salim Romero) immediately exited the vehicle and began running through the residential neighborhood. They immediately set up a containment. Once a containment was set up they were contacted by a citizen informant who told them the suspect was last seen running westbound through the driveway located at [REDACTED] Fetterly Avenue.

Based on the information provided, Sergeant Lee and Deputy Dennis Missel # [REDACTED] initiated canine announcements in English and Spanish through their patrol vehicle P.A. announcement system prior to deploying the canine search teams. These announcements were made over an approximate 10 minute time period.

An additional canine unit, Deputy Spencer Reedy # [REDACTED], arrived to assist in the search of the armed suspect. After the announcements were completed, Deputy Messerschmidt deployed his canine and searched and cleared the location the suspect was last seen running ([REDACTED] Fetterly). The search team began searching the yard of [REDACTED] Fetterly Avenue. Deputy Messerschmidt deployed his canine into the rear of the location. The canine located and bit Suspect Romero, who was hiding underneath a large tarp along the south side of the garage of the location.

The bite lasted approximately 40 to 45 seconds as Deputy Messerschmidt supervised from a distance of approximately 10 feet away.

Suspect Romero sustained canine lacerations and punctures to his right forearm.

Los Angeles County Fire Engine Company #3 under the command of Captain Robertson treated Suspect Romero in the field. Suspect Romero was later transported to Los Angeles County/USC Medical Center where he was seen and treated by Doctor Chako for his injuries. Suspect Romero was admitted to the hospital for treatment and observation. It was later determined Suspect Romero required surgery to repair damage to a tendon in his right forearm.

The investigation of this incident is based on information obtained from the crime and supplemental reports and interviews of the involved employees and witnesses.

The incident report and supplementary reports are **Exhibit A**, the overhead photo depicting the location is **Exhibit B**.

INVOLVED PERSONNEL:

Curt Messerschmidt, Canine Deputy, # [REDACTED]
Special Enforcement Bureau
Canine Services Detail

EMPLOYEE'S WORK HISTORY:

Date of Employment: 05-18-89
Date assigned to SEB: [REDACTED]
Prior Founded Force Incidents: [REDACTED]

SUSPECT:

Salim Romero, MH/10-20-78, 5'09", 181 lbs.
CDL- [REDACTED]

Suspect Romero's Criminal History Printout has been included with this case (**Exhibit C**).

DEPARTMENT WITNESSES:

Eric Lee, Canine Sergeant, # [REDACTED]
Special Enforcement Bureau
Canine Services Detail

Spencer Reedy, Canine Deputy, # [REDACTED]
Special Enforcement Bureau
Canine Services Detail

Dennis Missel, Canine Deputy, # [REDACTED]
Special Enforcement Bureau
Canine Services Detail

NON DEPARTMENT WITNESSES:

None

SUSPECT'S INJURIES:

Suspect Romero sustained canine lacerations and punctures to his right forearm.

DEPUTY INJURIES:

None.

PHYSICAL EVIDENCE:

Sergeant Lee videotaped and photographed the location after the incident.

The (2) CD's and DVD have been included with this case.

INVESTIGATORS' OBSERVATIONS:

Canine Detail Sergeant Eric Lee observed Mr. Romero's injuries and photographed and videotaped the injuries. He also videotaped the location where the incident occurred.

WEAPONS USED BY DEPUTY PERSONNEL:

Canine deployment.

WEAPONS USED BY SUSPECT(S):

None

PROPERTY DAMAGE:

None.

CRIMINAL INVESTIGATOR and CHARGES FILED:

Detective Jesse Lucero - Operation Safe Streets

Charges Filed: 496(1) P.C., 10851(a)(1) P.C.

Note: Suspect pleaded guilty and was sentenced to a two year state prison term.

WEATHER AND LIGHTING CONDITIONS:

The weather was clear. The lighting during this incident was daylight.

INVOLVED EMPLOYEE STATEMENT(S):

Curt Messerschmidt, Canine Deputy, # [REDACTED], was interviewed on April 1, 2011 at 1439 hours by Sergeants Albert Maldonado and Scott Hill from Internal Affairs Bureau. The interview took place at Internal Affairs Bureau in Interview Room "B." The interview was digitally recorded and transcribed. The transcripts of the interview have been included with this case (Exhibit).

Deputy Messerschmidt said based on the briefing provided by Deputy Farias, his sergeant (Sergeant Lee), made the decision to conduct a canine (K-9) search. Prior to the search, Sergeant Lee and Deputy Missel made several K-9 announcements around the perimeter of the containment area via their vehicle's public address system.

The announcements were repeated for approximately 10 minutes in both English and Spanish. They waited another 10 minutes after the announcements were made to give the suspect an opportunity to surrender.

The search team, which consisted of Deputy Messerschmidt, Sergeant Lee, Deputy Missel, Deputy Reedy and Deputy Messerschmidt's dog (Coz), began their search at the location where the suspect was last seen ([REDACTED] Fetterly Avenue). Once that location was cleared, they moved to and began to search the property to the south ([REDACTED] and [REDACTED] Fetterly Avenue). They systematically searched the front residence and the vehicles located in the driveway. As they reached the rear of their property he (Deputy Messerschmidt) noticed his dog began to alert to a human scent.

They continued their search on the north side of the property, behind the garage area. From a position of cover, Deputy Messerschmidt made another K-9 announcement. They waited approximately 30 seconds to give the suspect an opportunity to surrender. When he did not reply he immediately redeployed his dog. The dog moved around the to the east side of the garage and engaged the suspect who was hiding under a blue tarp.

Deputy Messerschmidt and Deputy Reedy made their way to the rear corner of the garage where they could see the dog had bitten the suspect on the right forearm. Deputy Messerschmidt ordered the suspect, who was face down on his stomach, to stop resisting and show his hands. The suspect refused, and began twisting his body in an apparent attempt to remove his arm from the dog's mouth. After approximately 40 to 45 seconds the suspect stopped moving and placed his left hand behind his back. Deputy Messerschmidt safely approached the suspect and removed the dog off the bite. Once the dog was removed he was immediately handcuffed by Deputy Missel. The suspect was escorted to the front of the property where he was positively identified by Deputies [REDACTED] and Farias as the person who ran from the stolen vehicle.

I.A.B. Note: Deputy Messerschmidt said he was approximately ten feet from his dog when he was engaged with the suspect.

Suspect's Statements:

The suspect (Salim Romero) was interviewed on November 11, 2010 by Canine Services Detail Sergeant Eric Lee. The interview was recorded on video. The DVD containing the interview has been included with this case.

The suspect admitted to running from a stolen vehicle and hiding in a backyard. He heard the helicopter overhead and knew the deputies were searching for him. He added he did not want to give up because he was on parole and he did not want to go to jail. He denied hearing the canine announcements.

Miscellaneous Section:

None